DEPARTMENT OF THE TREASURY U.S. CUSTOMS SERVICE

NEW YORK REGION NEW YORK, NEW YORK 10048

SUPPLEMENTAL DECLARATION FOR UNACCOMPANIED PERSONAL AND HOUSEHOLD EFFECTS

1. OWNER OF HOUSEHOLD GOODS (Last name, first and middle)	
2. DATE OF BIRTH	3. CITIZENSHIP
4. PASSPORT (Country and number)	
5. SOCIAL SECURITY NO.	6. RESIDENT ALIEN NO.
7. U.S. ADDRESS	10. EMPLOYER
	11. POSITION WITH COMPANY
8. FOREIGN ADDRESS	
9. REASON FOR MOVING	13. NATURE OF BUSINESS
	NAME AND TELEPHONE OF COMPANY OFFICIAL WHO 14. CAN VERIFY ABOVE INFORMATION
NAME AND ADDRESS OF FREIGHT FORWARDERS, 15. PACKERS AND SHIPPING AGENTS.	
SHIPPER ITINERARY 16. (Specify place of loading and intermediate ports)	
17. CERTIFICATION: (check one) A. Authorized Agent	B. Importer
18. SIGNATURE	
11-20-159 (3-86)	